

**Massachusetts Office for Victim Assistance
Federal Victims of Crime Act (VOCA) Grant Program
FY2006 Budget Request
July 1, 2005 through June 30, 2006
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Agency _____ Date _____

VOCA Program _____

A. VOCA Budget Summary (must match totals on corresponding budget pages)

Expense Item	A1: Total VOCA Request	A2: Total Program Match	A3: Direct Costs	A4: Indirect Costs
Personnel				
Consultants				
Office/Admin.				
Other				
<i>Total</i>	Total VOCA Request:	Total Match	Total Direct:	Total Indirect:

B. Match Requirement

Total VOCA Request (Total, Column A1)	
Total Match (Total, Column A2)	
Match <i>divided by</i> Total VOCA Request Must be at least 25%	Match:

C. Direct Costs vs. Indirect Costs (do not include Match in this equation)

Total VOCA Request (Total, Column A1)	
Total Direct Costs (Total, Column A3)	
Total Direct Costs <i>divided by</i> VOCA Request Must be at least 75%	Direct:
Total Indirect Costs <i>divided by</i> VOCA Request	Indirect:

Please submit a Budget Narrative detailing all VOCA Request costs

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PERSONNEL

Employee	Total Personnel Expense	Match	VOCA Request	Direct or Indirect?
<div style="display: flex; justify-content: space-between;"> <div>_____ (Name)</div> <div>_____ (Position)</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>_____ (Hr/Wk)</div> <div>_____ (Wk/Yr)</div> <div>_____ (Total Salary)</div> <div>_____ (Total Fringe/Taxes)</div> </div>				
<div style="display: flex; justify-content: space-between;"> <div>_____ (Name)</div> <div>_____ (Position)</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>_____ (Hr/Wk)</div> <div>_____ (Wk/Yr)</div> <div>_____ (Total Salary)</div> <div>_____ (Total Fringe/Taxes)</div> </div>				
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<i>Total Personnel (THIS PAGE)</i>				

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PERSONNEL Cont.

Employee	Total Personnel Expense	Match	VOCA Request	Direct or Indirect?
_____ (Name) _____ (Position) _____ (Hr/Wk) (Wk/Yr) (Total Salary) (Total Fringe/Taxes)				
_____ (Name) _____ (Position) _____ (Hr/Wk) (Wk/Yr) (Total Salary) (Total Fringe/Taxes)				
_____ (Name) _____ (Position) _____ (Hr/Wk) (Wk/Yr) (Total Salary) (Total Fringe/Taxes)				
<i>Total Personnel</i>				

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CONSULTANTS

Consultant	Total Per Year	Match	VOCA Request	Direct or Indirect?
_____ (Name) _____ (Agency) _____ (Description of Services) _____ _____ (Hrs/Yr) (Hourly Rate)				
_____ (Name) _____ (Agency) _____ (Description of Services) _____ _____ (Hrs/Yr) (Hourly Rate)				
<i>Total Consultants</i>				

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OFFICE/ADMINISTRATIVE COSTS

Expense Item	Match	VOCA Request	Direct or Indirect?
<i>Total Office/Admin. Expenses</i>			

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OTHER COSTS

Expense Item	Match	VOCA Request	Direct or Indirect?
A. Local Travel to provide services to victims of crime: Miles per Month _____ x Number of Months _____ = Total Miles _____ x \$0.37 per mile (not to exceed this amount) Total Travel Costs _____			
B. Training Training to staff in order to improve delivery of services to victims of crime (no other training costs are allowed)			
C. Other: _____ _____ _____ _____ _____ _____	_____ - _____ - _____ - _____	_____ _____ _____ _____ _____	
Total Other Costs			

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SOURCES OF MATCHING CONTRIBUTIONS

Source/Description	Budget Line Item	Amount
In-Kind		
_____	_____	
_____	_____	
_____	_____	
Total In-Kind:		
State		
_____	_____	
_____	_____	
_____	_____	
Total State:		
Local		
_____	_____	
_____	_____	
Total Local		
Other Sources		
_____	_____	
_____	_____	
_____	_____	
Total Other Sources:		
<i>Total Match</i>		